

County Borough of Burton upon Trent

EDUCATION COMMITTEE

ANNUAL REPORT

ON THE
SCHOOL HEALTH SERVICE
FOR THE YEAR 1972

BY

GEORGE M. CURTOIS
M.R.C.S., L.R.C.P., D.P.H., M.F.C.M.

PRINCIPAL SCHOOL MEDICAL OFFICER



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Annual Report of the Principal School Medical Officer For the Year 1972

To the Chairman and Members of the Education Committee.

I have the honour to present the Annual Report for the year 1972. As Dr. Mitchell retired before the statistical material upon which this Report is based was available, I have taken upon myself the duty of presenting this Report.

There were no serious outbreaks of infectious disease in school children. There were 2 cases each of scarlet fever, infective jaundice and whooping cough. There were 34 cases of measles compared with 138 in 1971.

Although somewhat fewer cases of scabies were treated at the School Clinic, i.e. 85 against 106 in 1971, this is a large number and is evidence that it is still present in the Borough. 223 children were found to be infested with head lice, an increase of 19 over the previous year. This is another problem that seems always to be with us and calls for constant vigilance.

The scheme for B.C.G. vaccination against tuberculosis started in 1963, still continues, and vaccination was offered to all children between 11 and 15 years of age. In all, 925 children were Heaf tested and 771 received B.C.G. vaccination. The Heaf positive cases were offered chest X-rays.

All attempts to recruit an additional full-time Dental Officer proved unsuccessful. Mr. Stannard is again to be congratulated on the work he has accomplished during the year, with the assistance of a full-time Dental Auxiliary, and only one session a week from a local Dental Surgeon.

Mr. Brook, our Senior Speech Therapist, has again been unable to obtain any Speech Therapists to assist him. He is to be congratulated on the success he has achieved with his intensive group therapy courses for stammerers.

I wish to express my thanks to the Education Committee for their support during the year, to the Director of Education and his staff, to the Heads of the Schools for their valuable assistance, to the general practitioners for their co-operation, and particularly to Dr. Mary Mills, who came to the School Clinic in January, 1973, on a part-time basis and has been largely responsible for the preparation of this report.

I am,

Your obedient servant,

G. M. CURTOIS,

Principal School Medical Officer

Staff of the School Health Service

Principal School Medical Officer :

ROBERT MITCHELL, B.Sc., M.B., Ch.B., D.P.H., M.F.C.M.
(Retired 6/12/72)

GEORGE M. CURTOIS, M.R.C.S., L.R.C.P., D.P.H., M.F.C.M.
(Commenced 7/12/72)

School Medical Officer :

P. K. RAY, M.B., B.S., D.P.H. (Cal.), [REDACTED]

Principal Dental Officer :

A. NOEL STANNARD, L.D.S.

Consultant Anaesthetist :

GEORGE QUAYLE, M.R.C.S., L.R.C.P., F.F.A.R.C.S. Eng., D.A.
(Part-time)

Dental Officer (Part-time) :

ROY THOMPSON, L.D.S., B.D.S.

Senior Speech Therapist :

F. BROOK, F.C.S.T.

Orthoptist :

MRS. C. DAVIES
(Part-time)

School Nurses :

MRS. M. T. POPIKAS, S.R.N., S.C.M.

MISS O. D. MARKS, S.R.N.

Dental Auxiliary :

MRS. EADIE

(Resigned 31/5/72)

MRS. M. BENNETT

(Commenced 1/7/72)

Dental Surgery Assistants :

MRS. E. CLAMP

MISS M. S. POSTLE

(Resigned 31/5/72)

MISS KELLERHER

(Commenced 1/6/72) (Resigned 28/7/72)

MRS. NOON

(Commenced 2/10/72)

Clerks :

MRS. J. BENTLEY

MRS. M. B. HAMP (*Part-time*)

MRS. E. MOORE

Cleansing Assistant (Part-time)

MRS. I. TAYLOR

15 JAN 1973
SCHOOL

1. Staff Changes. Dr. R. Mitchell, B.Sc., M.B., Ch.B., D.P.H., M.F.C.M., Principal School Medical Officer, retired on the 6th December, 1972, after approximately twenty years' service with this Authority, and was succeeded by Dr. G. M. Curtois on the 7th December, 1972.

2. Medical Inspections. The School Medical Officers have carried out routine examinations of infants during their first year at school.

In Junior schools, inspections were once again confined to the re-inspection of children with known defects and to such children as were referred with suspected defects by school staff or school nurses to the medical officer.

At the school leaver stage, all children were seen, weighed and measured and had their vision and colour vision tested by the school nurses. As a result of this a number of children were brought forward for a more detailed examination. School staff and parents also requested that a further proportion of them be examined for suspected defects by the School Medical Officers. Parents of all children in this age group are offered an appointment with the School Medical Officer, but only a small number of parents availed themselves of this opportunity. An increasing number of children in this age group are seen each year in connection with continental journeys and other courses of a residential or camping nature arranged by their respective schools.

The school nurses visited each school at least once a term for the purpose of performing either vision testing and/or head inspections. Any defects noted at these visits are reported to the School Medical Officers for appropriate action.

Visits have also been made to schools by the Principal Dental Officer and to a few schools by the Senior Speech Therapist.

A number of children are referred each year to the school medical service by parents, G.P.s., school staff and other interested bodies.

As in previous years a number of children have been referred with psychological problems. We are very fortunate in Burton upon Trent, however, in being able to call upon Mr. G. B. Henry, our Educational Psychologist, whose assistance in solving psychological problems has proved most useful.

The attendance of parents at routine medical examinations of school entrants remains good. At a few schools, however, the attendance leaves much to be desired and, unfortunately, it is usually in the cases where the parents do not attend that there is most need for consultation between doctor and parent. This often necessitates making repeated appointments at the School Clinic and school nurses and welfare officers having to pay repeated visits to the homes.

Accommodation in schools remains good, in fact most schools have a special medical room which proves most useful for routine medical examinations, vision testing and head inspections. They are more important than ever now that so many preventive vaccinations are carried out in the school.

I am happy to say that co-operation between the Schools, Clinic Staff and Head Teachers and their Staff is as good as ever, and is of much assistance in carrying out routine inspections and immunizations which have become part of every school-child's life.

3. Findings of the Medical Inspection and Treatment of Defects.

(a) **General Condition.** On examination, the children are divided into two categories: "Satisfactory" and "Unsatisfactory", according to their physique, height-weight ratio and present state of health.

The general condition of entrants during 1972 is shown below:

Satisfactory	Unsatisfactory
100%	NIL

On the whole, the standard of nutrition is high and the general condition of the children can be regarded as satisfactory.

With the co-operation of the General Practitioners, specialist opinion and care has been obtained where considered desirable. Co-operation with the Burton District Hospital Centre has also been well

maintained, and copies of reports of all school children seen by the Specialists at the Hospital are received by the School Medical Service. This is a great help to the Medical Officer concerned.

(b) **Nose and Throat Defects.** Medical Inspection revealed 173 defects of the nose and throat, the great majority being either enlargement of tonsils and adenoids or persistent nasal catarrh.

We are indebted to Mr. Hingorani, Consultant E.N.T. Surgeon at the Burton District Hospital Centre and his staff in dealing with these problems, in fact 376 school children were seen and treated at the Burton District Hospital Centre, a decrease of 44 on the previous year.

(c) **Ear Defects.** During 1972, 7 children from Burton upon Trent were in special residential schools for deaf or partially hearing children. Two boys were in Needwood School for the Partially Hearing, and two boys and three girls were in the Derby Royal School for the deaf. During the year 6 pupils were equipped with a hearing aid, bringing the number of children in Burton equipped with such apparatus to 15. With hearing aids these children have been able to continue their education at ordinary schools in the Borough.

(d) **Defects of Vision.** The special Eye Clinic provided at Burton District Hospital Centre has continued to function well.

Mrs. C. Davies, Orthoptist, seconded on a sessional basis from the Burton District Hospital Centre has been of great assistance. In addition to her work at the School Clinic she now carries out sessions in the schools. In all she saw 940 cases during the year. Out of these she referred 126 to the Consultant Ophthalmologist at the Burton District Hospital Centre for further opinion and treatment where necessary. 3,459 children had their vision tested by the School Nurses in schools and 331 cases were referred to the Ophthalmologist. 85 school children had spectacles prescribed for them during 1972.

As previously, the parent of a child found with defective vision is given the option of attending his or her own doctor, or the Eye Clinic for school children held at the Burton District Hospital Centre, or to attend an optician of his or her own choice.

(e) **Orthopaedic Defects.** Children suffering from orthopaedic abnormalities requiring active treatment are referred to the Burton District Hospital Centre, with the assent of the child's own doctor.

Advice is given at the School Clinic for minor defects.

As previously, flat feet and knock knees are the commonest orthopaedic defects found in school children, often associated with obesity.

110 children were found with orthopaedic defects at the school routine examinations.

(f) **Diseases of the Skin.** As usual scabies was the most prevalent skin condition seen at the School Clinic. 85 cases were treated during the year.

The number seen in the previous ten years were :

1971—106. 1970—81. 1969—67. 1968—130. 1967—91.
1966—86. 1965—18. 1964—20. 1963— 0. 1962— 0.

The routine treatment consists of a series of three baths followed by the application of Benzyl Benzoate Emulsion (or the use of Quelarda) which is given to all affected patients. Children of school age are excluded from school until free from infection when a fitness certificate is issued by the School Medical Officer.

It is not always possible to get all the members of an infected family to attend for treatment, but it has been achieved in the majority of cases. This has proved most useful in preventing the children being re-infected at home, often a problem in the past.

There has been a decrease in the number of cases of scabies treated in the School Clinic last year, but the disease is still prevalent.

Only 6 cases of impetigo were treated at the School Clinic during the year.

(g) **Speech Therapy.** There have been no applicants for the vacancy of full or part-time Speech Therapist and Mr. F. Brook has been without assistance during the whole of the year. The attendance figures are lower than usual owing to the unavoidable absence of Mr. Brook on sick leave during the months of November and December.

There has been no significant change in the number of children referred during the year nor in the types of speech problem dealt with.

The Report of the Committee headed by Professor Quirk on Speech Therapy Services was published in the Autumn. The main recommendations which emerged contained the following :

- (1) The unification of speech therapy services under Area Health Boards.
- (2) The provision of suitable accommodation for use as speech clinics.
- (3) A force of 2,500 full-time speech therapists should be made available ; the figure for 1970 was approximately 800.
- (4) There is some waste of speech therapist's skills at the present time. It is suggested that a cadre of auxiliaries or aides should be recruited to deal with the minor speech defects under the supervision of qualified speech therapists.
- (5) Employing authorities should make more generous provision of study leave, secondment and financial support for research and advanced study and of opportunities for therapists to combine clinical and research work.
- (6) Treatment for stammerers should be concentrated in regional centres where intensive group therapy could be given in close collaboration with other professions concerned.

The Senior Speech Therapist acknowledges that this Authority has amply fulfilled its duty in regard to (5) and (6) above by approving the research programme based on intensive group therapy courses for stammerers. Another successful course was held in July. Considerable knowledge and experience has been gained from these courses which should be invaluable when the regional health authorities assume responsibility for providing the appropriate treatment for stammerers.

F. BROOK, F.C.S.T.,
Senior Speech Therapist,

Number of children treated :	Boys	..	..	..	152
	Girls	..	..	..	80

232

(a)	Stammerers	..	..	..	..	24
(b)	Defects of articulation	..	..	..	..	159
(c)	Delayed Language/Speech Development	..	..	..	..	34
(d)	Cleft Palate Speech	..	..	..	..	6
(e)	Voice disorders	..	..	..	..	1
(f)	Supra Bulbar Pareisis	..	..	..	..	1
(g)	Articulatory dyspraxia	..	..	..	..	2
(h)	Speech defect associated with hearing loss	..	..	..	..	5

232

Discharged :

Adjusted	..	..	..	..	..	..	40
Partly adjusted	..	..	..	..	..	..	2
Unadjusted (chiefly because of parents' inability to co-operate)	..	..	..	..	..	..	6
Uneventuated (e.g. chiefly those who made a spontaneous recovery whilst awaiting treatment)	..	..	..	..	..	..	2
Transferred, e.g., to residential schools and to Educational Psychologist	..	..	..	..	..	..	5
Advised	..	..	..	..	..	..	9

64

Total attendances	..	..	..	..	..	..	1,106
Total on roll receiving treatment at 31st Dec., 1971	..	..	..	..	..	..	159
No. of children on waiting list at 31st Dec., 1971	..	..	..	..	..	..	43
No. of children referred during year	..	..	..	..	..	..	73
No. discharged during year	..	..	..	..	..	..	64
No. of children on waiting list at 31st Dec., 1972	..	..	..	..	..	..	43
No. of children receiving treatment at 31st Dec., 1972	..	..	..	..	..	..	168
No. of school visits made	..	..	..	..	..	..	11
No. of children seen during school visits	..	..	..	..	..	..	101

(h) **Infestation with Vermin.** The total number of examinations by School Nurses during 1972 was 24,320. 223 persons were found to be infested with vermin some of whom were in a generally dirty condition which was a marked increase on the previous year. The number of exclusions decreased from 94 in 1971 to 91 in 1972. The services of the Cleansing Assistant every morning during term time, and occasionally during the holiday periods, has been of great assistance.

Treatment for infested and dirty children is available at the School Clinic. Many children are allowed to continue attending school, provided that they also attend regularly at the School Clinic for any necessary treatment. A child who is heavily infested, who has scabies or impetigo, or is so dirty as to be offensive to others, or does not attend the School Clinic for treatment, is excluded from school until certified fit to resume attendance by the School Medical Officers. During 1972 it was found necessary to issue 6 Cleansing Notices, 2 Cleansing Orders.

(i) **Plantar Warts.** The number of children attending the School Clinic for treatment of this painful complaint showed an increase from 125 cases in 1971 to 132 cases during 1972. The routine treatment with Chlorosal proved satisfactory in the majority of cases. The remainder were treated with Salicylate paint, although this method of treatment needed to be fairly prolonged to achieve a satisfactory result.

(j) **Enuresis.** Treatment with the buzzers was still being used in carefully selected cases of enuresis. In all 45 cases have been investigated by the School Nurses during the year, and of these 31 were found to be suitable for a trial with a buzzer. Of these 15 were cured ; 2 failed to respond ; and 14 were still under treatment at the end of the year.

Report of the Principal School Dental Officer

Premises. The Dental Services for the County Borough continue to be available at a Central Clinic situated in the Infant Welfare Centre, Cross Street, an area of increasing industrial noise.

Staffing. On the 31st December, 1972, the Dental Staff comprised as follows :—

				<i>Salaried</i>	<i>Sessional</i>
Principal Dental Officer	..	..	..	1	0
Dental Officer and/or Senior Dental Officer	..			0	0.1
				<hr/>	<hr/>
Total	..	..		1	0.1
				<hr/>	<hr/>
(Whole-time Equivalent all Dental Officers : 1.1)					
Dental Auxiliaries	..	..	..	1	0
				<hr/>	<hr/>
Total	..	..		1	0
				<hr/>	<hr/>

(Whole-time Equivalent Auxiliaries : 1.0)

(Dental Surgery Assistants : 3.0)

(Whole-time Equivalent Dental Surgery Assistants : 3.0)

Staff Changes. These are noted elsewhere in this School Health Service Report.

General. The statistical pattern of treatment is shown in the appendix "Dental Inspection and Treatment" of this Report.

Dental Inspections continue to be carried out in schools but in view of the continued professional staff shortage these inspections have been concentrated on the Infant and Junior Schools but complete coverage of these schools is unfortunately not possible in one year.

During these inspections the Dental Auxiliary has given talks and demonstrations on Dental Health and Hygiene.

The one session weekly of the part-time Dental Surgeon has been used exclusively in surgery work.

General Anaesthetics continue to be administered by the Consultant Anaesthetist, Deputy Medical Officer of Health and the Assistant Medical Officer of Health.

All dental appliances are processed as in previous years by the technicians attached to the Burton and District Hospital Centre.

A. N. STANNARD, L.D.S.,
Principal School Dental Officer.

4. Handicapped Pupils. The distribution of Handicapped Pupils in this area is shown in the following table.

Handicap	Attending special School	At ordinary School	At no School	Total not attending special School
Blind	—	—	—	—
Partially Sighted	1	—	—	—
Deaf	5	—	—	—
Partially Hearing	2	1	—	1
Delicate	2	6	—	6
Educationally Sub-normal	186	140	1	141
Epileptic	2	16	—	16
Physically Handicapped	6	37	1	38
Maladjusted	8	1	—	1
Speech Defect	—	232	—	232
	212	433	2	435

Ascertainment of Educationally Sub-normal Children was continued throughout the year. 83 children were assessed during 1972 with the following results :—

Children examined and found E.S.N. :—

(formally ascertained)	20
(informally ascertained)	30
E.S.N. Children re-examined	30
Children examined and found maladjusted	3

Bitham School for E.S.N. children has proved most successful and has shown that there is a real need for a larger school to cope with all the children in Burton upon Trent who are in need of special educational treatment.

Child Guidance Clinic. The Child Guidance Clinic at Lichfield has again proved most useful. In all 14 cases from Burton upon Trent have been seen by Dr. Baker.

5. Infectious Diseases. The schedule for vaccination and immunization of school children has continued. Children at school entry being offered Diphtheria/Tetanus antigen together with oral polio vaccine as reinforcing doses, and measles vaccination.

B.C.G. vaccination is offered to children between 11 and 13 years of age. Rubella vaccination to girls of 13 years. Finally children are offered a reinforcing dose of oral polio vaccine and tetanus toxoid on leaving school.

The number of children immunised by the School Health Service during 1972 was as follows :

(1)	Number of children who received a full course of Diphtheria/Tetanus antigen	125
(2)	Number of children who received a reinforcing or booster dose of Diphtheria/Tetanus antigen ..	598
(3)	Number of children who received a full course of Diphtheria antigen	4
(4)	Number of children who received a reinforcing or booster dose of Diphtheria antigen	17
(5)	Number of children who received a reinforcing or booster dose of Polio/Tetanus antigen	454
(6)	Number of children who received a reinforcing or booster dose of Polio antigen	422
(7)	Number of children who received a full course of Tetanus antigen	1
(8)	Number of children who received a reinforcing or booster dose of Tetanus antigen	3
(9)	Number of children receiving Measles immunisation	501
(10)	Number of children receiving Rubella immunisation	326

The number of cases of Infectious and other Notifiable Diseases occurring in School children during 1972 was as follows :—

<i>Disease</i>	<i>Number notified</i>	<i>Admitted to Hospital</i>
Measles	34	1
Infective Jaundice	2	—
Scarlet Fever	2	—
Whooping Cough	2	—

6. B.C.G. Vaccination. Dr. M. B. Paul, the Chest Physician, carried out Heaf Skin testing of child contacts of cases of Tuberculosis. He gave B.C.G. Vaccination to those with negative skin reactions. 6 were successfully vaccinated under this scheme in 1972.

School Children Scheme. A very good response from parents to have their children vaccinated resulted in 925 children being given the Heaf Skin Test. As a result 86 children were found to have a positive reaction and 771 received B.C.G. vaccination.

7. Deaths of Children of School Age.

One child died in 1972.

Girl, aged 12 years . . . I (a) Acute left ventricular failure.
(b) Congenital aortic valve stenosis.

8. Minor Ailments.

The Authority maintains the School Clinic which is situated in a specially-adapted building at No. 32 Union Street. This building is used for School Medical purposes, and still contains the Speech Therapy Clinic although now a separate building is used. Minor Ailments Clinics with a School Medical Officer and School Nurse in attendance are held daily, between 9 and 10 a.m., including those periods when schools are closed for holidays.

All Medical Records of school children are kept at the School Clinic, and these are frequently referred to by Medical Officers when making special medical examination of children.

During 1972, there were 1,536 attendances at the Clinic for treatment of minor ailments, excluding attendances for disinfestation.

9. Employment of School Children.

The following table shows the number of children examined and passed fit for employment.

			<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Newspaper Delivery	..	..	43	11	54
Shop Assistants	..	..	—	14	14
Errand Boys	..	..	1	—	1
Receptionist	..	..	—	1	1
Car wash	..	..	1	—	1
General help	..	..	1	—	1
			<hr/>	<hr/>	<hr/>
			46	26	72
			<hr/>	<hr/>	<hr/>

10. School Meals Service and Free Milk Scheme.

The number of meals served was as follows :—

Children	..	..	..	767,224
Staff and Helpers	..	..	..	86,194
Students	..	..	..	—
				<hr/>
Total	..	..	..	853,418
				<hr/>

2,954 children were supplied with milk during the year.

MEDICAL INSPECTION TABLES, 1972

Number of Children.

Average number of children on the roll 11,117

Table 1

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools

A.—PERIODIC MEDICAL INSPECTIONS

Age Groups inspected and Number of Pupils examined in each :

Entrants	..	..	..	..	..	..	941
Leavers	..	..	..	..	..	..	845
Others	..	..	..	..	..	..	49
Total	..	..	..	..	..	..	1,835

B.—OTHER INSPECTIONS

Number of Special Inspections	..	..	..	..	236
Number of Re-Inspections	..	..	..	..	1,175
Total	..	..	..	..	1,411

C.—PUPILS FOUND TO REQUIRE TREATMENT

Age Groups Inspected (by year of birth)	For defective vision (excluding squint)	For any of the other conditions recorded in Table III	Total individual pupils
(1)	(2)	(3)	(4)
1968 and later	2	64	45
1967	10	307	220
1966	6	154	116
1965	2	21	11
1964	—	—	—
1963	—	—	—
1962	—	—	—
1961	—	—	—
1960	—	—	—
1959	—	—	—
1958	—	—	—
1957 and earlier	166	248	321
TOTAL	186	794	713

**D.—CLASSIFICATION OF THE PHYSICAL CONDITION
OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED
IN TABLE 1 A**

Age Groups Inspected (by years of birth)	Number of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No. (3)	% of Col. (2) (4)	No. (5)	% of Col. (2) (6)
(1)	(2)	(3)	(4)	(5)	(6)
1968 and later	103	103	100	—	—
1967	550	550	100	—	—
1966	288	288	100	—	—
1965	42	42	100	—	—
1964	5	5	100	—	—
1963	—	—	—	—	—
1962	1	1	100	—	—
1961	1	1	100	—	—
1960	—	—	—	—	—
1959	—	—	—	—	—
1958	—	—	—	—	—
1957 and earlier	845	845	100	—	—
TOTAL	1835	1835	100	—	—

Table II
Infestation with Vermin

(i)	Total number of individual examinations of pupils in Schools, by the School Nurses or other authorised persons ..	24,320
(ii)	Total number of individual pupils found to be infested ..	223
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	6
(iv)	Number of individual pupils in respect of whom Cleansing Orders were issued (Section 54 (3) Education Act, 1944)	2

Table III
Defects found by Medical Inspection
A.—PERIODIC INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)			Periodic Inspections				
				Entrants (3)	Leavers (4)	Others (5)	Total (6)	
4	Skin	..	..	T	5	5	—	10
				O	22	45	1	68
5	Eyes—							
	(a)	Vision	..	T	—	20	1	21
				O	15	141	—	156
	(b)	Squint	..	T	2	1	1	4
				O	19	8	2	29
	(c)	Other	..	T	—	—	—	—
				O	3	37	—	40
6	Ears—							
	(a)	Hearing	..	T	—	4	—	4
				O	13	7	—	20
	(b)	Otitis Media		T	2	—	—	2
				O	4	7	—	11
	(c)	Other	..	T	—	1	—	1
				O	5	2	—	7
7	Nose and Throat			T	4	—	1	5
				O	132	32	4	168
8	Speech	..	..	T	7	1	1	9
				O	77	8	4	89
9	Lymphatic Glands			T	—	—	—	—
				O	14	1	—	15
10	Heart	..	..	T	—	1	—	1
				O	11	4	—	15
11	Lungs	..	..	T	—	—	—	—
				O	13	8	—	21
12	Developmental—							
	(a)	Hernia	..	T	1	—	—	1
				O	9	—	—	9
	(b)	Other	..	T	1	—	—	1
				O	52	4	—	56
13	Orthopaedic—							
	(a)	Posture	..	T	—	—	—	—
				O	3	4	2	9
	(b)	Feet	..	T	—	—	—	—
				O	55	7	—	62
	(c)	Other	..	T	—	4	—	4
				O	18	16	1	35
14	Nervous System—							
	(a)	Epilepsy	..	T	—	—	1	1
				O	4	4	—	8
	(b)	Other	..	T	—	—	—	—
				O	8	2	1	11
15	Psychological—							
	(a)	Development		T	—	—	—	—
				O	2	1	1	4
	(b)	Stability		T	—	1	—	1
				O	7	21	1	29
16	Abdomen		..	T	—	—	—	—
				O	1	2	—	3
17	Other	..	..	T	7	1	—	8
				O	40	21	1	62

Table III (continued)

B.—SPECIAL INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)					Special Inspections	
						Requiring Treatment (3)	Requiring Observation (4)
4	Skin	..	..	..	..	—	7
5	Eyes—(a) Vision	..	..	..	..	—	31
	(b) Squint	..	..	..	..	—	2
	(c) Other	..	..	..	..	—	1
6	Ears—(a) Hearing	..	..	..	..	—	15
	(b) Otitis Media	..	..	..	..	—	—
	(c) Other	..	..	..	..	—	—
7	Nose and Throat	..	..	..	..	—	8
8	Speech	..	..	..	..	—	26
9	Lymphatic Glands			..	..	—	—
10	Heart	..	..	..	..	—	2
11	Lungs	..	..	..	..	—	—
12	Developmental—(a) Hernia	..	..	..	..	—	—
	(b) Other	..	..	..	..	—	5
13	Orthopaedic—(a) Posture	..	..	..	..	—	—
	(b) Feet	..	..	..	..	—	1
	(c) Other	..	..	..	..	—	6
14	Nervous System—(a) Epilepsy	..	..	..	..	—	—
	(b) Other	..	..	..	..	—	3
15	Psychological—(a) Development	..	..	..	..	—	4
	(b) Stability	..	..	..	..	—	1
16	Abdomen	..	..	..	..	—	3
17	Other	..	..	..	..	—	3

Table IV
Treatment Table

Group 1.—Eye Diseases, Defective Vision and Squint

	Number of cases known to have been dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	4	9
Errors of refraction (including squint)	135	31
TOTAL	139	40
Number of pupils for whom spectacles were prescribed	71	14

Group 2.—Diseases and Defects of Ear, Nose and Throat

	Number of cases known to have been dealt with	
	By the Authority	Otherwise
Received operative treatment—		
(a) for diseases of the ear	—	53
(b) for adenoids and chronic tonsillitis	—	119
(c) for other nose and throat conditions	—	4
Received other forms of treatment	1	199
TOTAL	1	375
Total number of pupils in schools who are known to have been provided with hearing aids—		
(a) in 1972	—	6
(b) in previous years	—	9

Group 3.—Orthopaedic and Postural Defects

	By the Authority	Otherwise
Number of pupils known to have been treated at clinics or out-patients departments	—	141

Group 4.—Diseases of the Skin (excluding uncleanness)

						Number of cases treated or under treatment during the year by the Authority
Ringworm—(i) Scalp	..	..	..	..	..	—
(ii) Body	..	..	..	..	..	—
Scabies	..	..	..	..	..	85
Impetigo	..	..	..	..	..	6
Other skin diseases	..	..	..	..	..	34
TOTAL						125

Group 5.—Child Guidance Treatment

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	14
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Group 6.—Speech Therapy

Number of pupils treated by Speech Therapist under arrangements made by the Authority	232
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Group 7.—Other Treatments Given

(a) Number of cases of miscellaneous minor ailments treated by the Authority	187
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	771
(d) Other than (a), (b) and (c) above	—
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Total number of attendances at Authority's Minor Ailments Clinics	1,536
Total number of attendances including uncleanness and Scabies	3,813

Table V
Dental Inspection and Treatment

Inspections

	Inspected	No. of pupils Requiring treatment	Offered treatment
(a) First inspection—School	3,682	} 2,092	} 2,091
(b) First inspection—Clinic	368		
(c) Re-inspection—School or Clinic	152	98	
Totals	4,202	2,190	2,091

Visits : (for treatment only)

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First visit in the calendar year ..	955	605	94	1,654
Subsequent Visits	1,698	1,221	209	3,128
Total Visits	2,653	1,826	303	4,782

Courses of Treatment

Additional courses commenced	52	34	3	89
Total courses commenced	1,007	639	97	1,743
Courses completed	×	×	×	955

Treatment

Fillings in permanent teeth	671	835	181	1,687
Fillings in deciduous teeth	1,306	125	×	1,431
Permanent teeth filled	543	749	168	1,460
Deciduous teeth filled	1,217	116	×	1,333
Permanent teeth extracted	61	219	64	344
Deciduous teeth extracted	933	259	×	1,192
General anaesthetics	437	185	27	649
Emergencies	63	49	14	126

Number of Pupils X-Rayed	32
Prophylaxis	795
Teeth otherwise conserved	96
Teeth root filled	—
Inlays	3
Crowns	4

Orthodontics :

New cases commenced during year	20
Cases completed during year	10
Cases discontinued during year	1
No. of removable appliances fitted	35
No. of fixed appliances fitted	—
Pupils referred to Hospital Consultant	21

Dentures

Number of pupils fitted with dentures for the first time :

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
(a) with full denture	—	—	—	—
(b) with other dentures	2	7	6	15
Total	2	7	6	15
Number of dentures supplied (first or subsequent time) ..	2	7	6	15

Anaesthetics

General Anaesthetics administered by Dental Officers —

DENTAL AUXILIARIES

Details of work carried out by Dental Auxiliaries and included in main Form

Visits (for treatment only)

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First visit in the calendar year ..	418	167	9	594
Subsequent visit	968	388	12	1,368
Total visits	1,386	555	21	1,962

Courses of Treatment :

Additional courses commenced ..	32	13	1	46
Total courses commenced ..	450	180	10	640
Courses completed	×	×	×	686

Treatment :

Fillings in permanent teeth	483	400	17	900
Fillings in deciduous teeth	862	69	×	931
Permanent teeth filled	372	334	14	720
Deciduous teeth filled	784	63	×	847
Deciduous teeth extracted	82	58	×	140
Prophylaxis	×	×	×	514

Dental Hygienists

N I L

